



**Nursing Home Quality Initiative  
Quality Measure Criteria and Selection  
August 9, 2002**

After a careful review of the Quality Measures Validation Report, as well as the comments and suggestions received from our partners and stakeholders, CMS has selected ten quality measures to be posted for all States and territories on the Nursing Home Compare website for the Fall. The following criteria were used to guide our decisions:

- 1) The measures must be both valid and reliable.
- 2) To the extent possible, the measures used for the national rollout should be consistent with those in the pilot.
- 3) Changes to the measures should be based on clear and obvious lessons learned from the pilot, from the validation, and from comments received from our partners.
- 4) Where a possible change is open to much debate, we left the measure for now, and will let the debate occur via the National Quality Forum (NQF) process.

The quality measures (without facility admission profile (FAP) unless otherwise designated) that will be reported in October are: 1) late-loss ADL worsening, 2) pressure ulcers, 3) pressure ulcers (with FAP), 4) residents with pain, 5) physical restraints used daily, 6) infections, 7) failure to improve and manage delirium in short-stay residents, 8) failure to improve and manage delirium in short-stay residents (with FAP), 9) short-stay residents with pain, and 10) short-stay residents with improvement in walking (with FAP).

The weight loss measure from the pilot failed validation, whether considered with or without the FAP, and is being eliminated from the measures that will be released in October. CMS will continue working with nursing homes to assure a focus on nutrition issues, and will look to the NQF process to identify a valid measure for this clinical issue, if one exists. If a measure is chosen by NQF, we will report it at the next available opportunity.

We stress that our motivation in moving forward with the public reporting of quality measures is our commitment and promise to our beneficiaries and their families to share information regarding nursing home quality of care in a timely fashion. This information can be used in the process of making an informed selection should they need to consider a nursing home for themselves or a loved one.

We would also like to take this opportunity to affirm our support of the ongoing NQF consensus process. As the process of choosing Nursing Home measures evolved, it became clear that the NQF needs adequate time to fully consider and discuss the Validation Report and to take into account any lessons learned from the Six-State Pilot Study. Once the NQF reaches consensus and delivers its recommendations, we expect to move to a timely implementation of the updated measures on Nursing Home Compare.

## Quality Measures for October Public Reporting

Date: 8/9/02

Pilot measure (P)	Quality Measure (Validation Report Measure Title)	Risk Adjustment	Validity (Multiple R)	Inter-rater Reliability (Kappa)	Status for October 2002 Roll-out and Comments*
<b>Chronic QMs</b>	<b>(6)</b>				
<b>P</b>	Residents who need more help doing daily activities (Late-loss ADL worsening)	With individual risk adjustment. FAP N/A	.51 (note: Preventive R was .49)	.84	<b>Keep</b> ; High validity based on Preventive R, superior reliability
<b>P</b>	Residents with pressure sores (Pressure Ulcers, High & Low Risk)	With individual risk adjustment. Without FAP	.58	.74	<b>Keep</b> ; High validity, superior reliability.
	Residents with pressure sores (Pressure Ulcers, High & Low Risk)	With individual risk adjustment. With FAP	.59	.74	<b>New</b> ; This QM with FAP was equally valid and reliable. Will share both in light of great stakeholder interest in how FAP affects them.
<b>P</b>	Residents with pain (Inadequate Pain Management)	With individual risk adjustment. Without FAP	.82	.73	<b>Keep</b> ; High validity, superior reliability. FAP version of measure was less valid.
<b>P</b>	Residents with physical restraints (Physical Restraints Used Daily)	Not risk adjusted. FAP N/A.	.52	.56	<b>Keep</b> ; Moderate validity, acceptable reliability.
<b>P</b>	Residents with infections (Infections)	With individual risk adjustment. Without FAP	.59	.50	<b>Keep</b> ; High validity, acceptable reliability. Measure has features that make it more robust in some states than in others. In light of the positive validation report, will continue this measure for October, and provide a more full explanation of its features to stakeholders.

**Note – The pilot QM “weight loss” failed validity testing and is being dropped from national rollout.**

**\* Improved consumer & provider language will be added to explanations for all measures.**

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Date: 8/9/02

Pilot measure (P)	Quality Measure (Validation Report Measure Title)	Risk Adjustment	Validity (Multiple R)	Inter-rater Reliability (Kappa)	Status for October 2002 Roll-out and Comments*
<b>Short Stay (PAC) QMs (4)</b>					
<b>P</b>	Residents with delirium (Failure to Improve & Manage Delirium)	With individual risk adjustment. Without FAP	.59	.65	<b>Keep;</b> High validity, acceptable reliability.
	Residents with delirium (Failure to Improve & Manage Delirium)	With individual risk adjustment. With FAP	.62	.65	<b>New;</b> This QM with FAP was equally valid and reliable. Will share both in light of great stakeholder interest in how FAP affects them.
<b>P</b>	Residents with pain (Inadequate Pain Management)	With individual risk adjustment. Without FAP	.64	.72	<b>Keep;</b> High validity, acceptable reliability. FAP version of measure was less valid.
see comment column	Residents who improved in walking (Improvement in Walking)	With individual risk adjustment. With FAP	.48 (note: Preventive R was .48)	.77	<b>Revised to report measure with FAP;</b> High validity based on Preventive R, superior reliability. Validation report showed that the measure without FAP in the pilot was not validated, therefore will switch to the measure with FAP.
<b>Validity Legend:</b> high - .55 up (total R) OR .45 up (Preventive R) moderate - .40 up (total R) OR .30 up (Preventive R) invalid –less than .40 (total R) or .30 (Preventive R)  <b>Reliability Legend:</b> Superior - >.75 Acceptable - >.40 Poor - <.40				<b>Summary of Measures:</b> <b>1 Category – eliminate</b> <b>5 Categories – same as pilot</b> <b>2 Categories– share both non-FAP and FAP measures</b> <b>1 Category – eliminated non-FAP and switch to FAP</b>	

\* Improved consumer & provider language will be added to explanations for all measures.